



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 9/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

2132

# FEE TRANSMITTAL

Patent fees are subject to annual revision.

## Complete If Known

Application Number	09/302,431
Filing Date	30 April 1999
First Named Inventor	CHANG-HYI LEE
Examiner Name	LANIER, BENJAMIN
Group/Art Unit	2132

TOTAL AMOUNT OF PAYMENT

(\$ **420.00**)

Attorney Docket No.

RECEIVED

## METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: 02-4943  
Deposit Account Number: \_\_\_\_\_

- ☐ Charge Any Additional Fee Required Under 37 C.F.R. § 1.16 and 1.17.  
☐ Applicant claims small entity status. See 37 CFR 1.27

## 2. ☒ Payment Enclosed:

(CHECK #44948)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	\$
1002	340	2002	170	Design filing fee	\$
1003	530	2003	265	Plant filing fee	\$
1004	770	2004	385	Reissue filing fee	\$
1005	160	2005	80	Provisional filing fee	\$

**SUBTOTAL (1)** (\$ **.00**)

### 2. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total claims	-20** =	x	=	
Independent Claims	-3** =	x	=	
Multiple Dependent			=	

77\*\* or number previously paid, if greater; For Reissues, see below

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1201	86	2201	43	Independent claims in excess of 3	
1202	18	2202	9	Claims in excess of 20	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2)** (\$ **0.00**)

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge-late filing fee or oath	\$
1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	\$
1053	130	1053	130	Non-English specification	\$
1812	2,520	1812	2,520	For filing a request for reexamination	\$
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	\$
1805	1,840 *	1805	1,840*	Requesting publication of SIR after Examiner action	\$
1251	110	2251	55	Extension for reply within first month	\$
1252	420	2252	210	Extension for reply within second month	\$ 420.00
1253	950	2253	475	Extension for reply within third month	\$
1254	1,480	2254	740	Extension for reply within fourth month	\$
1255	2,010	2255	1,005	Extension for reply within fifth month	\$
1401	330	2401	165	Notice of Appeal	\$
1402	330	2402	165	Filing a brief in support of an appeal	\$
1403	290	2403	145	Request for oral hearing	\$
1451	1,510	1451	1,510	Petition to institute a public use proceeding	\$
1452	110	2452	55	Petition to revive - unavoidable	\$
1453	1,330	2453	665	Petition to revive - unintentional	\$
1501	1,330	2501	665	Utility issue fee (or reissue)	\$
1502	480	2502	240	Design issue fee	\$
1503	640	2503	320	Plant issue fee	\$
1504	300	1504	300	Publication fee	\$
1807	50	1807	50	Processing fee for provisional applications	\$
1806	180	1806	180	Submission of Information Disclosure Statement	\$
8021	40	8021	40	Recording each patent assignment per property (Times number of properties)	\$
1809	770	2809	385	Filing a submission after final rejection (37 C.F.R. § 1.129(a))	\$
1810	770	2810	385	For each additional invention to be examined (37 C.F.R. § 1.129(b))	\$
8001	3			Printed copy of patent w/o color	\$
Other Fee (specify) _____					\$
Other Fee (specify) _____					\$

\*\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** \$ **420.00**

## SUBMITTED BY

## Complete (if applicable)

Typed or Printed Name	Robert E. Bushnell, Esq.		Reg. Number	27,774	
Signature		Date	November 6, 2003	Deposit Account User ID	

REB/asc

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.